#### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Dorothy	
		First Name	First Name
	your driver's license or	Smith	
	passport).	Middle Name	Middle Name
	. ,	Bailey	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Dorothy	
	have used in the last 8	First Name	First Name
	years	Ann	
	Include your married or	Middle Name	Middle Name
	maiden names.	Bailey	
	maraon namoo.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - 6 2 2 4	xxx - xx -
	number or federal Individual Taxpayer	OR	OR
	Identification number	0vv _ vv _	Qvv _ vv _

(ITIN)

Deb	otor 1	Dorothy Smith Bail	ey	c	case number (if know	wn)
			About Debtor 1:		About Debtor 2	(Spouse Only in a Joint Case):
4.	and En	usiness names nployer cation Numbers	☑ I have not u	sed any business names or EINs	I have not	used any business names or EINs.
	(EIN) y	ou have used in t 8 years	Business name		Business name	
	Include	trade names and	Business name		Business name	
	doing b	ousiness as names	Business name		Business name	
			EIN		EIN	
			EIN		EIN —	
5.	Where	you live			If Debtor 2 lives	s at a different address:
			1475 Sawdust	Rd		
			Number Street  Apt 2105		Number Street	
			Αρι 2103			
			Spring	TX 77380		
			City	State ZIP Code	City	State ZIP Code
			Montgomery County		County	
			•	address is different from	•	ailing address is different
			the one above, f	fill it in here. Note that the ny notices to you at this	from yours, fill	it in here. Note that the court tices to you at this mailing
			Number Street		Number Street	
			P.O. Box	·	P.O. Box	
			City	State ZIP Code	City	State ZIP Code
6.		ou are choosing strict to file for	Check one:		Check one:	
		bankruptcy	petition, I ha	at 180 days before filing this ave lived in this district longer other district.	petition, I h	ast 180 days before filing this nave lived in this district longer other district.
				ner reason. Explain. S.C. § 1408.)		ther reason. Explain. S.C. § 1408.)
Р	art 2:	Tell the Court A	bout Your Bankr	uptcy Case		
7.	Bankrı	apter of the uptcy Code you		brief description of each, see No orm 2010)). Also, go to the top of		U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are cho under	posing to file	Chapter 7			
			Chapter 11			
			Chapter 12			
			Chapter 13			

Deb	Dorothy Smith Bai	ley	Case number (if known)				
8.	How you will pay the fee		ourt for n ay with c	more details about how	w you may pay. Typ or money order. If	oically, if you are pa your attorney is sub	he clerk's office in your local ying the fee yourself, you may omitting your payment on your inted address.
				pay the fee in install Is to Pay The Filing Fe			and attach the Application for
		<u> </u>	By law, a j nan 150% ee in inst	judge may, but is not % of the official povert	required to, waive y ty line that applies to ose this option, you	our fee, and may do your family size an must fill out the Ap	you are filing for Chapter 7. o so only if your income is less nd you are unable to pay the plication to Have the Chapter 7
9.	Have you filed for	$\overline{\mathbf{V}}$	lo				
	bankruptcy within the last 8 years?		es.				
		Distri	:t		W	hen	Case number
		District.	i		10.	MM / DD / YYYY	On an accordance
		Distri	· T		VV	/hen MM / DD / YYYY	Case number
		Distri	:t		W	hen MM / DD / YYYY	Case number
10.	Are any bankruptcy	$   \overline{V} $	lo			, 22,	
	cases pending or being filed by a spouse who is		es.				
	not filing this case with you, or by a business	Debto	r			Relations	hip to you
	partner, or by an	Distri	:t		W	hen	Case number,
	affiliate?					MM / DD / YYYY	if known
		Debto	r			Relations	hip to you
		Distri	:t		W	hen	Case number,
						MM / DD / YYYY	if known
11.	Do you rent your residence?	ш.		o to line 12. Is your landlord obtain	ed an eviction judg	ment against you?	
						_	: Against You (Form 101A)

Debtor 1 Dorothy Smith Baile	у				Case number (	if known)		
Part 3: Report About An	уΒι	ısine	sses You Own as a	a Sole P	roprietor			
12. Are you a sole proprietor of any full- or part-time business?	<b>I</b>		Go to Part 4. Name and location of b	ousiness				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or			Name of business, if any  Number Street					
If you have more than one sole proprietorship, use a separate sheet and attach it			City  Check the appropriate	box to de	scribe your business.	State	_ ZIP Co	de
to this petition.			Single Asset Rea Stockbroker (as of	al Estate (and defined in defined	efined in 11 U.S.C. § s defined in 11 U.S.C 11 U.S.C. § 101(53A) ned in 11 U.S.C. § 10	C. § 101(51B)	))	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).				must attach your come tax return			
debior :	$\overline{\mathbf{V}}$	No.	I am not filing under C	hapter 11.				
For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but	I am NOT a small bu	ısiness debto	r accordin	g to the definition in
11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code, and				-	
		Yes.	I am filing under Chap Bankruptcy Code, and				Ū	
Part 4: Report If You Ow	n o	r Hav	e Any Hazardous F	Property	or Any Propert	y That Nee	eds Imm	ediate Attention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?					
hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed	, why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent			Where is the property?	? Number	Street			
repairs?				City			State	ZIP Code

Debtor 1 Dorothy Smith Bailey Case number (if known)

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not	require	ed to rec	eive a briefing	about
credit co	ounselii	ng beca	use of:	

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

# ☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1	Dorothy Smith Bail	ley			Case number (if	know	n)
Ρ	art 6:	Answer These 0	Quest	ions for Reporting P	urpos	ses		
16.	What k have?	ind of debts do you	16a		idual pi	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b	•	r invest	iness debts? Business debt ment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	State the type of debts y	you ow	e that are not consumer or bu	sines	s debts.
17.	Are yo Chapte	u filing under er 7?	V	No. I am not filing unde	er Chap	oter 7. Go to line 18.		
	any exc exclud admini are pai availab	estimate that after empt property is ed and strative expenses d that funds will be ble for distribution ecured creditors?		•	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Debtor 1	Dorothy Smith Baile	Case number (if known)
Part 7:	Sign Below	
For you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		X /s/ Dorothy Smith Bailey Dorothy Smith Bailey, Debtor 1  Executed on 06/14/2022 MM / DD / YYYY   X Signature of Debtor 2  Executed on MM / DD / YYYY

Debtor 1 Dorothy Smith Ba	niley	Case number (if knowr	n)
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in thi eligibility to proceed under Chapter 7, 11, 11 relief available under each chapter for which the debtor(s) the notice required by 11 U.S. certify that I have no knowledge after an incis incorrect.	2, or 13 of title 11, United Stat h the person is eligible. I also C. § 342(b) and, in a case in v	tes Code, and have explained the ocertify that I have delivered to which § 707(b)(4)(D) applies,
	X /s/ Donald W. Bryeans Signature of Attorney for Debtor	Date	06/14/2022 MM / DD / YYYY
	Donald W. Bryeans		
	Printed name  Bryeans and Garcia, PLLC		
	Firm Name  5001 S. Cooper St., Ste 209  Number Street		
	Arlington	TX	76017
	City	State	ZIP Code
	Contact phone (817) 440-3333	Email address don@l	bglawtx.com
	24057716		_
	Bar number	State	

Fill in this info	ormation to i	dentify your ca	se and this filing:		
Debtor 1	Dorothy	Smith	Bailey		
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for	r the: <b>SOUTHERI</b>	N DISTRICT OF TEXAS		
Case number				Charle	if also in the
(if known)				_	if this is an led filing
					J. J
Official Form	106A/B				
					12/15
Schedule A/	B. Property	<u> </u>			12/15
filing together, both sheet to this form.	th are equally re . On the top of a	sponsible for sup ny additional pag	t. Be as complete and accurate as a plying correct information. If more es, write your name and case numb	space is needed, attach a er (if known). Answer eve	separate rry question.
Part 1: Des	scribe Each R	residence, Bui	Iding, Land, or Other Real Es	tate You Own or Have	an Interest In
1. Do you own o	or have any lega	l or equitable inte	rest in any residence, building, land	, or similar property?	
✓ No. Go t	o Part 2.				
Yes. Wh	ere is the propert	y?			
	-	-	all of your entries from Part 1, inclu Write that number here	_	\$0.00
D. 40 D.				•	
Part 2: Des	scribe Your V	enicies			
-		•	st in any vehicles, whether they are cle, also report it on Schedule G: Exec	_	•
3. Cars, vans, tr	ucks, tractors, s	port utility vehicle	es, motorcycles		
□ No					
Yes					
3.1.		Who h	nas an interest in the property?	Do not deduct secured clai	ms or exemptions. Put the
Make:	Chevrolet	Check	one.	amount of any secured cla	
Model:	Equinox		ebtor 1 only	Creditors Who Have Claim	
Year:	2019	브 ,	ebtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mileag	ge: <b>13,800</b>	_	ebtor 1 and Debtor 2 only least one of the debtors and another	\$24,575.00	\$24,575.00
Other information:		— ப		<u> </u>	<u> </u>
2019 Chevrolet I	Equinox (appro		heck if this is community property		
13,800 miles)		(s	ee instructions)		

Deb	tor 1	Dorothy Sm	ith Bailey	Case number (if known)	
4.		les: Boats, trail	notor homes, ATVs and other recreational vehicles, other ers, motors, personal watercraft, fishing vessels, snowmobile		
5.			of the portion you own for all of your entries from Part 2, have attached for Part 2. Write that number here	_	\$24,575.00
P	art 3:	Describe	Your Personal and Household Items		
Do	you own	or have any le	egal or equitable interest in any of the following items?	<b>,</b> E	Current value of the oortion you own? Oo not deduct secured laims or exemptions.
6.	Exampl	nold goods and les: Major appli	d furnishings ances, furniture, linens, china, kitchenware		
	☐ No ☑ Yes	s. Describe	3 Sofas \$50 each 2 Chairs \$15 each Coffee Table \$5 Lamps \$30 2 Beds \$75 each Dresser \$5 Night Table \$5 Small Appliances \$50 Dishes/Flatware/Cookware \$25 Outdoor Furniture \$10 Linens \$5 Pillows \$10		\$475.00
7.	Electro Example	es: Televisions	s and radios; audio, video, stereo, and digital equipment; cor ctions; electronic devices including cell phones, cameras, m		
	_	s. Describe	TV \$30 Cell Phone \$50	-	\$80.00
8.	Example No		nd figurines; paintings, prints, or other artwork; books, picturn, or baseball card collections; other collections, memorabilia		
9.			and hobbies  btographic, exercise, and other hobby equipment; bicycles, pd kayaks; carpentry tools; musical instruments	pool tables, golf clubs, skis;	
	✓ No	s. Describe		-	
10.	✓ No		es, shotguns, ammunition, and related equipment		

Deb	otor 1 Dorothy Smith Bailey	Case number (if known)	
11.	, , ,	eather coats, designer wear, shoes, accessories	
	No  ✓ Yes. Describe Shirts \$20  Pants/Sho Shoes \$20  Other Evel	·	\$110.00
12.	Jewelry  Examples: Everyday jewelry, costume gold, silver	me jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	•
	No ✓ Yes. Describe 4 Rings \$6 Costume C	0 each Jewelry \$300	\$540.00
13.	Non-farm animals  Examples: Dogs, cats, birds, horses  No  Yes. Describe	s	1
14.		d items you did not already list, including any health aids you	
	✓ No  Yes. Give specific information		]
15.		entries from Part 3, including any entries for pages you have	\$1,205.00
		enial Appata	
Pa	art 4: Describe Your Final	iciai Assets	
		able interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y	you own or have any legal or equita		portion you own? Do not deduct secured
Do y	you own or have any legal or equita  Cash  Examples: Money you have in your petition  No	able interest in any of the following?	portion you own? Do not deduct secured
Do y	Cash  Examples: Money you have in your petition  No Yes  Deposits of money  Examples: Checking, savings, or of	able interest in any of the following? wallet, in your home, in a safe deposit box, and on hand when you file your	portion you own?  Do not deduct secured claims or exemptions.
Do )	Cash  Examples: Money you have in your petition  No Yes  Deposits of money  Examples: Checking, savings, or of brokerage houses, and of the complete of t	wallet, in your home, in a safe deposit box, and on hand when you file your  Cash:  ther financial accounts; certificates of deposit; shares in credit unions,	portion you own?  Do not deduct secured claims or exemptions.
Do )	Cash  Examples: Money you have in your petition  No Yes  Deposits of money  Examples: Checking, savings, or of brokerage houses, and institution, list each.	wallet, in your home, in a safe deposit box, and on hand when you file your  Cash:  Cher financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	portion you own?  Do not deduct secured claims or exemptions.
Do )	Cash  Examples: Money you have in your petition  No Yes  Deposits of money  Examples: Checking, savings, or of brokerage houses, and institution, list each.	wallet, in your home, in a safe deposit box, and on hand when you file your  Cash:  Cher financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same  Institution name:	portion you own?  Do not deduct secured claims or exemptions.  \$0.00
Do )	Cash  Examples: Money you have in your petition  No Yes  Deposits of money  Examples: Checking, savings, or of brokerage houses, and of institution, list each.  No Yes  17.1. Checking account:	wallet, in your home, in a safe deposit box, and on hand when you file your  Cash:  Chase 0227	portion you own? Do not deduct secured claims or exemptions.  \$0.00

Deb	tor 1 Dorothy Smith Bailey	Case number (if known)
18.	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms,	money market accounts
	✓ No  ☐ Yes Institution or issuer name:	,
19.	Non-publicly traded stock and interests in incorporated and un an interest in an LLC, partnership, and joint venture	incorporated businesses, including
	No     Yes. Give specific information about them Name of entity:	% of ownership:
20.	Government and corporate bonds and other negotiable and not Negotiable instruments include personal checks, cashiers' checks, Non-negotiable instruments are those you cannot transfer to some	promissory notes, and money orders.
	No     Yes. Give specific information about them Issuer name:	
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift sa profit-sharing plans	vings accounts, or other pension or
	<ul><li>No</li><li>Yes. List each account separately. Type of account: Institution name:</li></ul>	
22.	<b>Security deposits and prepayments</b> Your share of all unused deposits you have made so that you may <i>Examples</i> : Agreements with landlords, prepaid rent, public utilities companies, or others	• •
	No	م المناطقة
23.	Yes Institution name or in Annuities (A contract for a specific periodic payment of money to	
	✓ No  ☐ Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified ABLE 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	Eprogram, or under a qualified state tuition program.
	No     ☐ Yes Institution name and description. Separate to the separate	arately file the records of any interests. 11 U.S.C. § 521(c)
25.	Trusts, equitable or future interests in property (other than any powers exercisable for your benefit	thing listed in line 1), and rights or
	✓ No  Yes. Give specific	
26.	Patents, copyrights, trademarks, trade secrets, and other intell	• • •
	Examples: Internet domain names, websites, proceeds from royalting No  Yes. Give specific	es and licensing agreements
	information about them	
27.	Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative associated associat	iation holdings, liquor licenses, professional licenses
	✓ No  Yes. Give specific information about them	

Deb	tor 1 Dorothy Smith Bailey		Case number (if known)	·
Moi	ey or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years			Federal: State: Local:
29.	Family support  Examples: Past due or lump sum a	alimony, spousal support, child support, mair	itenance, divorce settlement	, property settlement
	<ul><li>✓ No</li><li>✓ Yes. Give specific information</li></ul>		Alimony:	
	Tes. Give specific information		Maintenan	
			Support:	
			Divorce se	
			Property s	ettlement:
30.		y insurance payments, disability benefits, sic Security benefits; unpaid loans you made to s		
31.	No ✓ Yes. Name the insurance company of each policy	insurance; health savings account (HSA); c	redit, homeowner's, or renter	's insurance Surrender or refund value:
		ompany name:	beneficiary.	Surremaer or returna value.
	_	nue cross clue officia ficalifi isurance		\$0.00
	— Н	lumana Dental/Vision/Rx		\$0.00
32.			policy, or are currently	
33.	Examples: Accidents, employment	other or not you have filed a lawsuit or made disputes, insurance claims, or rights to sue	de a demand for payment	
	✓ No ☐ Yes. Describe each claim			
34.	Other contingent and unliquidate rights to set off claims	d claims of every nature, including counte	erclaims of the debtor and	
	✓ No  Yes. Describe each claim			

Deb	tor 1	Dorothy Sm	nith Baile	Case number (if known)	
35.	Any fin	ancial assets	you did n	ot already list	
	✓ No ☐ Yes	s. Give specifi	c informati	ion	
36.			-	our entries from Part 4, including any entries for pages you have number here	\$364.55
P	art 5:	Describe A	ny Busi	ness-Related Property You Own or Have an Interest In. List a	ny real estate in Part 1
37.	Do you	own or have	any legal	or equitable interest in any business-related property?	
		Go to Part 6. Go to line 3	3.		
					Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accour	nts receivable	or commi	issions you already earned	ciains of exemptions.
	✓ No ☐ Yes	s. Describe			
39.		es: Business-	related cor	and supplies mputers, software, modems, printers, copiers, fax machines, rugs, telephones, onic devices	
	✓ No ☐ Yes	s. Describe			
40.	Machin	ery, fixtures,	equipmen	nt, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes	s. Describe			
41.	Invento	ory			
	✓ No ☐ Yes	s. Describe			
42.	Interest	ts in partners	hips or joi	int ventures	
	✓ No ☐ Yes	s. Describe	Name of	entity: % of ownership.	:
43.	Custon	ner lists, maili	ng lists, o	or other compilations	
	✓ No ☐ Yes	s. Do your lis	ts include	personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	_
		Yes. D	escribe		

44. Any business-related property you did not already list  No Yes. Give specific information.  45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	
Yes. Give specific information.  45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of portion you own Do not deduct sec claims or exempti  Examples: Livestock, poultry, farm-raised fish  No  Yes  No  Yes. Give specific information	
If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7. Yes. Go to line 47.  Current value of portion you own Do not deduct see claims or exempti  Examples: Livestock, poultry, farm-raised fish No Yes  No Yes. Give specific information	0.00
✓ No. Go to Part 7.   Yes. Go to line 47.    Current value of portion you own Do not deduct see claims or exempti  Examples: Livestock, poultry, farm-raised fish  No Yes  No Yes  48. Cropseither growing or harvested  No Yes. Give specific information	
☐ Yes. Go to line 47.     Current value of portion you own Do not deduct see claims or exemption you own Do not deduct see claims or exemption of examples: Livestock, poultry, farm-raised fish  All No Yes  No Yes  No Yes. Give specific information	
## Portion you own Do not deduct sec claims or exemption of the second section of the se	
Examples: Livestock, poultry, farm-raised fish  No Yes  48. Cropseither growing or harvested  No Yes. Give specific information	ured
48. Cropseither growing or harvested  No Yes. Give specific information	
<ul> <li>No Yes. Give specific information</li></ul>	
Yes. Give specific information	
✓ No ☐ Yes	
☐ Yes	
50. Farm and fishing supplies, chemicals, and feed	
✓ No ☐ Yes	
51. Any farm- and commercial fishing-related property you did not already list	
✓ No  Yes. Give specific information	
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	0.00

Deb	tor 1 <u>Dor</u>	othy Smith Bailey	Case nu	mber (if known)	
Pa	art 7: Des	cribe All Property You Own or Have an Ir	nterest in That You D	oid Not List Above	9
53.	•	e other property of any kind you did not already lis eason tickets, country club membership	st?		
	✓ No ☐ Yes. Giv	ve specific information.			
54.	Add the doll	ar value of all of your entries from Part 7. Write th	at number here		\$0.00
Pa	art 8: List	the Totals of Each Part of this Form			
55.	Part 1: Total	real estate, line 2		<b>→</b>	\$0.00
56.	Part 2: Total	vehicles, line 5	\$24,575.00		
57.	Part 3: Total	personal and household items, line 15	\$1,205.00		
58.	Part 4: Total	financial assets, line 36	\$364.55		
59.	Part 5: Total	business-related property, line 45	\$0.00		
60.	Part 6: Total	farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total	other property not listed, line 54	+\$0.00		
62.	Total persor	nal property. Add lines 56 through 61	\$26,144.55	Copy personal property total	+ \$26,144.55
63.	Total of all p	roperty on Schedule A/B. Add line 55 + line 62			\$26,144.55

Fill in this inf	ormation to i	identify your o	case:			
Debtor 1	Dorothy First Name	Smith Middle Name	Bailey			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name			
		or the: <b>SOUTHE</b>	RN DISTRICT OF T	EXAS		☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C	: The Prop	erty You Cl	aim as Exemp	t		04/22
Using the property	you listed on Scill out and attach	hedule A/B: Prope to this page as m	erty (Official Form 106	SA/B) as	your source, list th	esponsible for supplying correct information. the property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100°	fic dollar amour ne amount of an enefits, and tax-e % of fair market	nt as exempt. Alt y applicable stat exempt retiremer value under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl	claim t emptio mited i mption	he full fair market nssuch as those n dollar amount. I to a particular dol	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Pro	perty You Cla	im as Exempt			
☐ You are	•	nd federal nonban	Check one only, of kruptcy exemptions.  J.S.C. § 522(b)(2)	-	rour spouse is filing C. § 522(b)(3)	with you.
2. For any prop	erty you list on	Schedule A/B th	at you claim as exen	npt, fill	in the information	below.
Brief description of Schedule A/B that			Current value of the portion you own		nt of the tion you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		only one box for xemption	
Brief description: 2019 Chevrolet	Equinox (appr	ox. 13,800	\$24,575.00		<b>\$0.00</b> 00% of fair market	11 U.S.C. § 522(d)(2)
miles) Line from <i>Schedul</i> e	e A/B: <b>3.1</b>			a	alue, up to any oplicable statutory nit	
-	•	-	more than \$189,050?		on or after the date	of adjustment
<b>☑</b> No	d you acquire the		vears after that for cas			

Debtor 1	Dorothy Smith Bailey	Case number (if known)					
Part 2:	Additional Page						
	iption of the property and line on A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B		eck only one box for h exemption			
Dishes/Fla Outdoor F Linens \$5 Pillows \$1	50 each 515 each ble \$5 0 '5 each 5 le \$5 bliances \$50 atware/Cookware \$25 Furniture \$10	\$475.00		\$475.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief descrip TV \$30 Cell Phone	ption:	\$80.00		\$80.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
	orts \$20	\$110.00		\$110.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
		\$540.00		\$540.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)		
Brief descrip  Cash on H  Line from S	•	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)		
Brief descrip Chase 022 Line from S		\$22.39		\$22.39 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)		
Brief descrip Chase 286 Line from S		\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)		

Debtor 1 Dorothy Smith Bailey		Case number	(if known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Chase 9536	\$1.63	<b>\$1.63</b> ☐ 100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:		value, up to any applicable statutory limit	
Brief description: Chase 1624	\$240.53	\$240.53 100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:		value, up to any applicable statutory limit	
Brief description: Blue Cross Clue Shield Health Insurance	\$0.00	\$0.00 100% of fair market	11 U.S.C. § 522(d)(7)
Line from Schedule A/B:31		value, up to any applicable statutory limit	
Brief description: Humana Dental/Vision/Rx	\$0.00	\$0.00	11 U.S.C. § 522(d)(7)
Line from Schedule A/B:31		100% of fair market value, up to any applicable statutory limit	

Fill in this inf	ormation to identif	v vour case				
Debtor 1	Dorothy S	mith	Bailey			
	First Name M	liddle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name M	liddle Name	Last Name			
United States Ba	nkruptcy Court for the: S	OUTHERN D	ISTRICT OF TEXAS			
Case number (if known)					Check if this is	
Official Form	106D					,
		Have Cla	ims Secured by	Property		12/15
correct informatic On the top of any  1. Do any credit No. Che Yes. Fill  Part 1: Lis  2. List all secur claim, list the	on. If more space is need additional pages, write stors have claims secured this box and submit the in all of the information left All Secured Claim and creditor separately for each additional secured the secured claims.	eded, copy the your name and ed by your promise form to the obelow.  The same and t	court with your other sche one secured one than one	out, number the entri (n). edules. You have noth	es, and attach it to thi	is form.  Column C
	particular claim, list the sible, list the claims in alpue.			Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any
2.1		Describe the secures the	property that claim:	\$28,602.00	\$24,575.00	\$4,027.00
Chase Auto Fina Creditor's name Attn: Bankruptc		- 2019 Chev	olet Equinox			
Number Street PO Box 901076		_				
Fort Worth City  Who owes the del  Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a communi	Debtor 2 only the debtors and another claim relates	Continge Unliquida Disputed Nature of lie An agree Statutory Judgmer	n. Check all that apply. The ment you made (such as lien (such as tax lien, month lien from a lawsuit cluding a right to offset)	s mortgage or secured	car loan)	
Date debt was inc	eurred <u>05/31/2019</u>	_ Last 4 digits	of account number	2 6 0 7		
Add the dollar val that number here:	ue of your entries in Co	olumn A on thi	s page. Write	\$28,602.00		
If this is the last p	age of your form, add t	he dollar value	totals from		1	

Official Form 106D

all pages. Write that number here:

\$28,602.00

Fill in this inf	armatian to i	dontify your o					
Fill in this inf							
Debtor 1	Dorothy First Name	Smith Middle Name	Bailey Last Name				
	· iiot i tailio	maaid Hame	24011141110				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
(Opodse, ii iiiiig)	riistivanie	Wildale Name	Last Name				
United States Ba	nkruptcy Court fo	the: <b>SOUTHER</b>	N DISTRICT OF TEX	AS			
Case number					_	l ou livairi	
(if known)				_	L	Check if this is a amended filing	an
Official Form	106E/F						
		s Who Have	e Unsecured Cl	aims			12/15
Do not include an If more space is not to this page. On the Part 1:	y creditors with seeded, copy the she top of any ad	partially secured Part you need, fi ditional pages, w	and on Schedule G: Ex I claims that are listed i ill it out, number the en rrite your name and cas secured Claims	n <i>Schedule D</i> tries in the bo	: Creditors Who Hoxes on the left. At	old Claims Secur	ed by Property.
1. Do any credi	tors have priority	unsecured clair	ms against you?				
☐ No. Got ☑ Yes.	to Part 2.						
claim. For ea show both pric more space is	ch claim listed, id ority and nonprior	entify what type o ty amounts. As n ty unsecured clair	creditor has more than of claim it is. If a claim han uch as possible, list the ms, fill out the Continuat	as both priority claims in alph	and nonpriority amo	ounts, list that clain	m here and or's name. If
(For an explai	nation of each typ	e of claim, see the	e instructions for this for	m in the instruc	ction booklet.		
					Total claim	Priority amount	Nonpriority amount
2.1					\$4,374.00	\$4,374.00	\$0.00
Bryeans and Ga	rcia, PLLC		Last A dimita of accou				
Priority Creditor's Nam 100 E 15th St. S			Last 4 digits of accou	-			
Number Street	16 000		When was the debt in	curred? 06	6/07/2022	-	
			As of the date you file	e, the claim is:	Check all that app	ly.	
			Contingent				
Fort Worth	TX	76102	Unliquidated Disputed				
City	State	ZIP Code	ш .				
Who incurred the	debt? Check	one.	Type of PRIORITY un		):		
Debtor 1 only Debtor 2 only			Domestic support		u owo the governm	ont	
Debtor 1 and E	Debtor 2 only		Claims for death o		u owe the governmers while you were	eni	
	the debtors and	another	intoxicated	. poroonar injur	, , 54 11010		
☐ Check if this o	claim is for a con	nmunity debt	Other. Specify				
Is the claim subje	ct to offset?		Attorney fees fo	or this case			
✓ No Yes							

Debtor 1	Dorothy Smith Bailey	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
No. Yes  4. List all o If a creditype of cl	of your nonpriority unsecured claims tor has more than one nonpriority unsec laim it is. Do not list claims already incl	claims against you?  Submit this form to the court with your other schedules.  in the alphabetical order of the creditor who holds each claim.  cured claim, list the creditor separately for each claim. For each claim listed, uded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	,
			Total claim
Tampa City Who incurred Debtor 1 o Debtor 1 o At least or	itor's Name uptcy reet ese Circle  FL 33634 State ZIP Code Check one. only	Last 4 digits of account number 5 1 6 4  When was the debt incurred? 04/2018  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$1,890.82
No Yes  4.2  Capital One Nonpriority Cred		_ Last 4 digits of account number When was the debt incurred?	\$1,229.25
Number Str	85 reet	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
At least of	State ZIP Code  I the debt? Check one.  only	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	

Debtor 1 Dorothy Smith Bailey	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$2,178.31
Capital One Services, LLC/Walmart	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 30285	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130-0285	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	☐ Student loans	
Debtor 1 only  Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
4.4		\$2,467.79
Capital One Services, LLC/Walmart	Last 4 digits of account number	Ψ2,407.79
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 30285 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Salt Lake City UT 84130-0285	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		\$2,203.00
Chase Card Services	Last 4 digits of account number 3 2 2 1	
Nonpriority Creditor's Name	When was the debt incurred? 09/2018	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. 15298	_ Contingent	
	Unliquidated	
Wilmington DE 19850	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	☐ Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		

Debtor 1 Dorothy Smith Bailey	Case number (if known)	
Part 2: Your NONPRIORITY Unse	ecured Claims Continuation Page	
After listing any entries on this page, number previous page.	r them sequentially from the	Total claim
4.6		\$736.00
Citibank	Last 4 digits of account number 0 3 3 9	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 12/2015	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 790034	Contingent	
	Unliquidated	
St Louis MO 63179	Disputed	
St Louis MO 63179 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community de	bt Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.7		\$1,230,21
Comenity/Jared	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 650972  Number Street	As of the date you file, the claim is: Check all that apply.	
Trumber Succe	Contingent	
	Unliquidated	
D-II TV 75005.00	—— Disputed	
Dallas TX 75265-09 City State ZIP Code	<del></del>	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community de	bt Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
4.8		\$7,797.00
Discover Financial	Last 4 digits of account number 2 4 1 2	
Nonpriority Creditor's Name	When was the debt incurred? 05/2018	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 3025	Contingent	
	Unliquidated	
New Albany OH 43054	Disputed	
New Albany OH 43054 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community de	bt Credit Card	
Is the claim subject to offset?		
No Vas		
Yes		

Debtor 1 Dorothy Smith Bailey	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$2,288.00
Kohls/Capital One	Last 4 digits of account number 2 1 1 3	
Nonpriority Creditor's Name Attn: Credit Administrator	When was the debt incurred? 12/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 3043	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Milwaukee         WI         53201           City         State         ZIP Code	- Toward MONDRIODITY was a count of a factor	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Charge Account	
Is the claim subject to offset?		
✓ No Yes		
4.10		\$125.00
MCHD Montgomery Hospital District Nonpriority Creditor's Name	_ Last 4 digits of account number	
PO Box 5587	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Conroe TX 77305-2587	Disputed	
Conroe         TX         77305-2587           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Bill	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.11		\$2,637.00
Regional Finance	_ Last 4 digits of account number4040_	
Nonpriority Creditor's Name 3401 W Davis St	When was the debt incurred? 07/2021	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Disputed	
Conroe         TX         77304           City         State         ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Unsecured	
Is the claim subject to offset?		
No No		
Yes		

Debtor 1 Dorothy Smith Bailey	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number ther previous page.	m sequentially from the	Total claim
4.12		\$3,368.16
Synchrony Bank/Care Credit	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 965064 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Orlando FL 32896-5064	□ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
<ul><li>✓ Debtor 1 only</li><li>✓ Debtor 2 only</li></ul>	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
Is the claim subject to offset?	ordan dara	
☑ No Yes		
4.13		\$743.00
Synchrony Bank/La-Z-Boy Nonpriority Creditor's Name	_ Last 4 digits of account number 9 5 8 8	
Attn: Bankruptcy	When was the debt incurred? 07/2017	
Number Street PO Box 965060	As of the date you file, the claim is: Check all that apply.	
1 0 Box 00000	_	
	Disputed	
Orlando FL 32896 City State ZIP Code	Turns of MONDDIODITY amendment alsima	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Charge Account	
✓ No  ☐ Yes		
4.14		\$1,270.16
US Bank/RMS	Last 4 digits of account number 9 1 4 5	Ψ1,270.10
Nonpriority Creditor's Name	When was the debt incurred? 06/2016	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 5229	Contingent	
	Unliquidated	
Cincinnati OH 45201	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
Is the claim subject to offset?	C. Odit Odi d	
No No		
Yes		

Debtor 1	Dorothy	Smith Baile	<b>Э</b> у			Case	e number (if known)
Part 3:	List C	thers to Be	Notified Abou	ut a Debt That \	You Already	/ Li:	sted
For ex credit debts	xample, if a for in Parts that you li	collection ac 1 or 2, then li sted in Parts	gency is trying to ist the collection a	collect from you fo agency here. Simi litional creditors h	or a debt you d larly, if you ha	owe ive n	bt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
	rvices, Inc	;		On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
	ry S Trum	an Blvd		Line 4.13 of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			_		$   \sqrt{} $	Part 2: Creditors with Nonpriority Unsecured Claims
St Charle	s	MO State	<b>63301-4047</b> ZIP Code	<ul><li>Last 4 digits of</li></ul>	account num	ber	
FMA Allia	ınce. Ltd			On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
Name PO Box 2 Number	,			_			Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston City		TX State	77252-2409 ZIP Code	<ul><li>Last 4 digits of</li></ul>	account num	ber	
	Credit Mar	nagement, Ir	ıc	On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
PO Box 3 Number	<b>Street</b>			Lineof	(Check one):	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Los Ange	eles	<b>CA</b> State	90030 ZIP Code	— Last 4 digits of —	account num	ber	
Midland C	Credit Mar	nagements,	Inc	On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
Name		d, Ste 300		Line <u><b>4.12</b> of</u>	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
				<ul> <li>Last 4 digits of</li> </ul>	account num	ber	
Troy City		MI State	<b>48083</b> ZIP Code	_			
	Enterprise	Systems		On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
Name 2479 Edis Number	Street	Unit A		Line <u>4.1</u> of	(Check one):	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Twinsbur	g	ОН	44087-2340	— Last 4 digits of	account num	ber	
City		State	ZIP Code				

Debtor 1	Dorothy Smith Bailey	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> ◀	\$4,374.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$4,374.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts		\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> ₹	\$30,163.70
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$30,163.70

Fill	in this inf	ormation to i	ueniny your case.			
Debte		Dorothy	Smith	Bailey		
		First Name	Middle Name	Last Name		
Debte	or 2 use, if filing)	First Name	Middle Name	Last Name		
(Spo	use, ii iiiiig <i>)</i>	riistivaine	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court fo	r the: <b>SOUTHERN D</b>	ISTRICT OF TEXA	<u> </u>	
Case	number					Check if this is an
(if kn	own)					amended filing
						<b>3</b>
Offic	ial Form	106G				
Be as correc	complete ar	nd accurate as p		ed people are filing t additional page, fill	ogether, both are equally respon t out, number the entries, and at	sible for supplying
Be as correc	complete aret informations top of any	nd accurate as p on. If more spac additional pages	ossible. If two marrie e is needed, copy the s, write your name and	ed people are filing t additional page, fill d case number (if kr	ogether, both are equally respon t out, number the entries, and at	,
Be as correc	complete are tinformation to the top of any o you have	nd accurate as pon. If more spaceadditional pages	ossible. If two marrie e is needed, copy the s, write your name and ontracts or unexpired	ed people are filing t additional page, fill d case number (if kr leases?	ogether, both are equally respon t out, number the entries, and at own).	sible for supplying tach it to this page.
Be as correc	complete are trinformation to post any o you have	and accurate as pon. If more space additional pages any executory c	ossible. If two marrie is needed, copy the s, write your name and ontracts or unexpired le this form with the cou	ed people are filing to additional page, fill dicase number (if krilleases?	ogether, both are equally respon t out, number the entries, and at	sible for supplying tach it to this page.
Be as correct on the last of t	complete are to information top of any o you have No. Che Yes. Fill ist separate for (for example)	and accurate as pon. If more space additional pages any executory could this box and find all of the informal person of the pers	cossible. If two marries is needed, copy the s, write your name and contracts or unexpired le this form with the counation below even if the core company with whore cell elease, cell phone).	ed people are filing to additional page, fill dicase number (if known leases?  Unit with your other some contracts or leases might you have the contracts.	ogether, both are equally respon t out, number the entries, and at own).	sible for supplying tach it to this page.  report on this form.  ty (Official Form 106A/B).
Be as correct on the last of t	complete are to information top of any o you have No. Che Yes. Fill ist separate for (for example)	and accurate as pon. If more space additional pages any executory country in all of the informally each person comple, rent, vehitracts and unexp	cossible. If two marries is needed, copy the s, write your name and contracts or unexpired le this form with the counation below even if the core company with whore cell elease, cell phone).	ad people are filing to additional page, fill dicase number (if known leases?  urt with your other soft e contracts or leases mayou have the contracts of the contracts of the contracts of the instructions	ogether, both are equally respont out, number the entries, and at own).  edules. You have nothing else to are listed on Schedule A/B: Proper eact or lease. Then state what ea	sible for supplying tach it to this page.  report on this form.  ty (Official Form 106A/B).  ach contract or lease the contract or lease the contract of lease the lease the contract of lease the lease t
Be as correct on the last of t	complete are to information to you have No. Che Yes. Fill ist separate for (for example control or Alexande	and accurate as pon. If more space additional pages any executory country in all of the informally each person comple, rent, vehitracts and unexp	cossible. If two marries is needed, copy the s, write your name and contracts or unexpired le this form with the commation below even if the or company with whom cle lease, cell phone). ired leases.	ad people are filing to additional page, fill dicase number (if known leases?  urt with your other soft e contracts or leases mayou have the contracts of the contracts of the contracts of the instructions	ogether, both are equally respont out, number the entries, and at own).  edules. You have nothing else to are listed on Schedule A/B: Proper ract or lease. Then state what eafor this form in the instruction book	sible for supplying tach it to this page.  report on this form.  ty (Official Form 106A/B).  ach contract or lease the contract or lease the contract of lease the lease the contract of lease the lease t
Se as correct on the L. D. L. L. is ex	complete are to information to you have No. Che Yes. Fill ist separate for (for example control or	and accurate as pon. If more space additional pages any executory concept this box and fin all of the information and person of the person of	cossible. If two marries is needed, copy the s, write your name and contracts or unexpired le this form with the commation below even if the or company with whom cle lease, cell phone). ired leases.	ad people are filing to additional page, fill dicase number (if known leases?  urt with your other soft e contracts or leases mayou have the contracts of the contracts of the contracts of the instructions	ogether, both are equally respont out, number the entries, and at own).  edules. You have nothing else to are listed on Schedule A/B: Proper act or lease. Then state what eafor this form in the instruction book.	sible for supplying tach it to this page.  report on this form.  ty (Official Form 106A/B).  ach contract or lease the contract or lease the contract of lease the lease the contract of lease the lease t

**77380** ZIP Code

TX State

The Woodlands
City

### Case 22-31697 Document 1 Filed in TXSB on 06/17/22 Page 30 of 62

Fill in this information to identify your case:						
Debtor 1	<b>Dorothy</b> First Name	Smith Middle Name	Bailey Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	kruptcy Court fo	or the: <b>SOUTHERN D</b>	ISTRICT OF TEXAS			
Case number (if known)						

#### Official Form 106H

### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

P-3		agos,s your name and out	(i. i.i.o.i., r.i.o.i.), q.i.o.i.o.i				
1.	Do you have any codebtors?  ✓ No  ✓ Yes	(If you are filing a joint case, do r	not list either spouse as a codebtor.)				
2.			y state or territory? (Community property states and territories o, Puerto Rico, Texas, Washington, and Wisconsin.)				
	No. Go to line 3.  ✓ Yes. Did your spouse, forme ✓ No	er spouse, or legal equivalent live	e with you at the time?				
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.						
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the deb				
			Check all schedules that apply:				

Official Form 106H Schedule H: Your Codebtors page 1

		tify your case:						
Debtor 1	Dorothy	Smith	Bailey					
	First Name	Middle Name	Last Name		Che	ck if thi	s is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		—   <b>—</b>	An am	nended filing	
United States Bankru			DISTRICT OF TE	XAS		A supp	plement showing	g postpetition
Case number	proy Court for a	.c. <u></u>				chapte	er 13 income as	of the following
(if known)				_		MM / [	DD / YYYY	
Official Form 10	<u>61</u>							
Schedule I: You	ır Income							12
include information ab about your spouse. If your name and case no Part 1: Descril	more space is r	needed, attach a se n). Answer every c	eparate sheet to th					
<ol> <li>Fill in your employ information.</li> </ol>	ment		Debtor 1			Deh	tor 2 or non-fili	na snouse
If you have more th	_	ployment status	☐ Employed				Employed	ng opouse
job, attach a separa with information ab	9	pioyment status	✓ Not employe	ed		$\square$	Not employed	
additional employe	rs. Occ	cupation	Retired					
Include part-time, s	- ul -							
or self-employed w	ork. Em	ployer's name						
•		ployer's address	Number Street			— Numl	ber Street	
Occupation may inc student or homema applies.	ker, if it							
student or homema	ker, if it							
student or homema	ıker, if it		City	State	e Zip Code			State Zip Cod
student or homema		w laws awalawad f	City	State	e Zip Code	City		State Zip Cod
student or homema		v long employed t	•	State	e Zip Code	City		State Zip Cod
student or homema applies.	Hov	w long employed t Monthly Incom	here?	State	e Zip Code	City		State Zip Cod
student or homema applies.  Part 2: Give Description:	Hovertails About	Monthly Incom	here? <u></u>		_	,	60 in the space.	
student or homema applies.  Part 2: Give Do Estimate monthly inco non-filing spouse unless f you or your non-filing s	Hovetails About me as of the day you are separate spouse have mo	Monthly Income te you file this form the direct.	here?  e  n. If you have noth	ing to repo	rt for any line,	, write \$	·	Include your
student or homema applies.  Part 2: Give Do Estimate monthly inco non-filing spouse unless fyou or your non-filing s	Hovetails About me as of the day you are separate spouse have mo	Monthly Income te you file this form the direct.	here?  e  n. If you have noth	ing to repo	rt for any line,	, write \$	·	Include your
student or homema applies.  Part 2: Give Do Estimate monthly incomon-filing spouse unless of you or your non-filing syou need more space, as a contract of the	Howetails About me as of the day you are separate spouse have mo ttach a separate	Monthly Income te you file this formed. The tend one employ sheet to this form.	here?  e  n. If you have noth er, combine the info	ing to repo	rt for any line,	, write \$	at person on the	Include your
student or homema applies.  Part 2: Give Description on applies of you or your non-filing story ou need more space, as you need more space, as payroll deductions)	Hove tails About me as of the date you are separate spouse have mottach a separate s	Monthly Income te you file this form ted. The than one employ sheet to this form. The than one employ sheet to this form. The than one employ sheet to this form.	here?  e  n. If you have noth er, combine the info	ing to repo ermation for For	ort for any line, or all employer  Debtor 1	, write \$	r Debtor 2 or	Include your

Deb	tor 1	Dorothy Smith Bailey		Case nun	nbei	r (if known)			
				For Debtor 1		or Debtor on-filing s		<b>.</b>	
	Cop	by line 4 here	4.	\$0.00	_	\$(	0.00	_	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$0.00			0.00		
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00			0.00		
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00			0.00		
		Required repayments of retirement fund loans	5d.	\$0.00			0.00		
	5e.	Insurance	5e.	\$0.00			0.00		
	5f.	Domestic support obligations	5f.	\$0.00			0.00		
	5g.		5g.	\$0.00		\$(	0.00		
	5h.	Other deductions. Specify:	5h. <b>-</b>	\$0.00		\$(	0.00		
6.		I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$0.00		\$(	0.00		
7.		Subtract line 6 from line 4.	7.	\$0.00		\$(	0.00		
8.		all other income regularly received:	90	¢0.00		¢.			
	oa.	Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		<u>⊅</u> ı	0.00		
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b.	Interest and dividends	8b.	\$0.00		\$(	0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$(	0.00		
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d.	Unemployment compensation	8d.	\$0.00		\$(	0.00		
	8e.	Social Security	8e.	\$1,567.40		\$1,91	0.40		
	8f.	Other government assistance that you regularly receive		<u> </u>					
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$0.00		\$(	0.00		
	8g.	Pension or retirement income	- 8g.	\$0.00		\$43°	1.09		
	8h.	Other monthly income.		<u> </u>					
		Specify:	8h.	÷ <u>\$0.00</u>		\$(	0.00		
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,567.40		\$2,34	1.49		
10.		culate monthly income. Add line 7 + line 9.  I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$1,567.40	+[	\$2,34	1.49	]=	\$3,908.89
11.		te all other regular contributions to the expenses that you list in S	chedu	ıle J.					
•••	Incl	ude contributions from an unmarried partner, members of your househ nds or relatives.			r roc	ommates,	and ot	her	
	Don	not include any amounts already included in lines 2-10 or amounts tha	t are r	not available to pay e	xpe	enses liste	d in Sc	hed	lule J.
	Spe	cify: Daughter Contribution					11.	+	\$200.00
12.	inco	I the amount in the last column of line 10 to the amount in line 11.  I the amount in the last column of line 10 to the amount in line 11.  I the amount in the last column of line 10 to the amount in line 11.					12.		\$4,108.89 Combined
13		applies. you expect an increase or decrease within the year after you file t	his fo	rm?					monthly income
	₩.	No. None.						—	
		Yes. Explain:							

G	ill in this inform	ation to identif	y your case:				al er al e	•-	
	Debtor 1	<b>Dorothy</b> First Name	<b>Smith</b> Middle Name	Baile Last Na				nded filing ement showing	postpetition
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame	-	chapter following	13 expenses as g date:	s of the
	United States Bankru	uptcy Court for the:	SOUTHERN DI	STRICT OI	F TEXAS		MM / DF	D / YYYY	_
	Case number (if known)							,,,,,,,,	
O	fficial Form 10	6J				J			
S	chedule J: Yo	ur Expenses	S						12/15
nai	rrect information. If me and case numbe	more space is ne	eded, attach anoth wer every question	er sheet to t	ing together, both ar this form. On the top				
1.	Is this a joint case		noid						
2.	✓ No. Go to line  ✓ Yes. <b>Does D</b>	e 2.  ebtor 2 live in a se  . Debtor 2 must file	parate household? e Official Form 106J No		s for Separate Housel				Dana daman dani
	Do not list Debtor 1 Debtor 2.	and	Yes. Fill out this in for each dependen		Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state the de names.	ependents'							Yes No Yes No Yes No Yes No No No Yes No Yes
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						□ Tes
Ŀ	Part 2: Estima	te Your Ongoi	ng Monthly Exp	enses					
to		of a date after the		-	re using this form as supplemental Sche	•	-	-	
	lude expenses paid ch assistance and h		•	•				Your expens	es
4.			nses for your resid				4		\$1,674.00
	If not included in I	line 4:							
	4a. Real estate ta	xes					4	a	
	4b. Property, hom	eowner's, or renter	's insurance				4	b	\$18.00
	4c. Home mainter	nance, repair, and u	upkeep expenses				4	c	
	4d. Homeowner's	association or con-	dominium dues				4	d.	

Sb. Water, sewer, garbage collection   Sb.   Sano.00	Debi	Dorotny Smith Balley	Case number (if known)	
6. Utilities:  6a. Electricity, heat, natural gas  6a. \$153.00  6b. Water, sewer, garbage collection  6c. Telephone, cell phone, Internet, satellite, and cable sarvices  6d. Other, Specify: Cell Phone  6d. \$212.00  7. Food and housekeeping supplies  7. \$200.00  8. Childcare and children's education costs  8. 9. Clothing, laundry, and dry cleaning  9. \$50.00  10. Personal care products and services  10. \$55.00  11. Medical and dental expenses  11. \$100.00  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$474.00  15c. Vehicle insurance  15d. Other insurance. Specify: See continuation sheet  15d. \$124.70  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17c. Car payments for Vehicle 1  17b. Car payments for Vehicle 1  17c. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i).			Your expenses	s
6a.       \$153.00         6b.       Water, sewer, garbage collection         6c.       Telephone, cell phone, Internet, satellite, and cable services         6c.       Telephone, cell phone internet, satellite, and cable services         6c.       \$212.00         7.       Food and housekeeping supplies       7.       \$200.00         8.       Childcare and children's education costs       8.	5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6b. Water, sewer, garbage collection   6b.	6.	Utilities:		
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Cell Phone 6d. \$212.00 7. Food and housekeeping supplies 7. \$200.00 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$55.00 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include are payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 16. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: See continuation sheet 15d. Other insurance. Specify: See continuation sheet 15d. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		6a. Electricity, heat, natural gas	6a	\$153.00
cable services 6d. Other. Specify: Cell Phone 6d. \$212.00 7. Food and housekeeping supplies 7. \$200.00 8. Childcare and children's education costs 8. \$  9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$55.00 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$474.00 15c. Vehicle insurance 15d. Other insurance. Specify: See continuation sheet 15d. Other insurance. Specify: See continuation sheet 17d. Car payments for Vehicle 1 17d. Car payments for Vehicle 2 17d. Other. Specify: 17d. 17d. Other. Specify: 17d. 17d. Other. Specify: 17d. 17d. Other. Specify: 17d. 17d. Other spayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		6b. Water, sewer, garbage collection	6b	
Reference of the state of the s			6c	\$80.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 110. \$55.00 111. Medical and dental expenses 111. \$100.00 112. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: See continuation sheet 15d. Other insurance. Specify: See continuation sheet 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your income (Official Form 106I).		6d. Other. Specify: Cell Phone	6d.	\$212.00
9. Clothing, laundry, and dry cleaning       9.       \$50.00         10. Personal care products and services       10.       \$55.00         11. Medical and dental expenses       11.       \$100.00         12. Transportation. Include gas, maintenance, bus or train faire. Do not include car payments.       12.       \$150.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.	7.	Food and housekeeping supplies	7.	\$200.00
10. Personal care products and services       10. \$55.00         11. Medical and dental expenses       11. \$100.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12. \$150.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. magazines, and books         14. Charitable contributions and religious donations       14.         15. Insurance.       Do not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a.         15b. Health insurance       15c. \$2474.00         15c. Vehicle insurance. Specify: See continuation sheet       15d. \$124.70         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16.       16. 16. 17. Installment or lease payments:         17a. Car payments for Vehicle 1       17a. 17a. 17a. 17b. 17b. 17c. 17c. Other. Specify: 17c. 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 17d. 17d. 17d. Other. Specify: 17d. 17d. 17d. Other. Specify: 17d. 17d. 17d. Other. Specify: 17d. 17d. 17d. 17d. 17d. 17d. 17d. 17d.	8.	Childcare and children's education costs	8.	
11. Medical and dental expenses  12. \$100.00  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. \$200.00  15c. Vehicle insurance  15d. Other insurance. Specify: See continuation sheet  15d. \$124.70  17d. Car payments for Vehicle 2  17d. Other. Specify:  17d. Other. Specify:  17d. Other spayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	9.	Clothing, laundry, and dry cleaning	9.	\$50.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify: See continuation sheet  15d. \$124.70  15d. Other insurance. Specify: See continuation sheet  15d. \$124.70  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	Personal care products and services	10.	\$55.00
fare. Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance  15d. Other insurance. Specify: See continuation sheet  15d. Other insurance. Specify: 16d.  17a. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16d.  17 Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify: 17c.  17d. Other. Specify: 17d.  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	11.	Medical and dental expenses	11.	\$100.00
magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify: See continuation sheet  15d. Other insurance. Specify: See continuation sheet  15d. Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other spyments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).			12.	\$150.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: See continuation sheet 15d. S124.70  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16.  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	13.		13.	
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: See continuation sheet 15d. \$200.00  15d. Other insurance. Specify: See continuation sheet 15d. \$124.70  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	14.	Charitable contributions and religious donations	14.	
15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: See continuation sheet 15d. Other insurance. Specify: See continuation sheet 15d. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	-			
15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: See continuation sheet 15d. Other insurance. Specify: See continuation sheet 15d. \$124.70  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16.  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).			450	
15c. Vehicle insurance 15c. \$200.00 15d. Other insurance. Specify: See continuation sheet 15d. \$124.70 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16.  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).				£474.00
15d. Other insurance. Specify: See continuation sheet  15d. \$124.70  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  16. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).				
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16.  17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).				
Specify:	16.		13u.	<b>Φ124.70</b>
17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		One of the	16.	
17b. Car payments for Vehicle 2  17c. Other. Specify:	17.	Installment or lease payments:		
17c. Other. Specify:		17a. Car payments for Vehicle 1	17a	
17d. Other. Specify:		17b. Car payments for Vehicle 2	17b	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.		17c. Other. Specify:	17c	
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.		17d. Other. Specify:	17d	
• • • • • • • • • • • • • • • • • • • •			18	
	19.	Other payments you make to support others who do not live with you.  Specify:	19.	

## Case 22-31697 Document 1 Filed in TXSB on 06/17/22 Page 35 of 62

Den	ioi i	Dorothy Smith Balley	Case number (if known)			
20.		real property expenses not included in lines 4 or 5 of this form or on ule I: Your Income.				
	20a.	Mortgages on other property	20a			
	20b.	Real estate taxes	20b			
	20c.	Property, homeowner's, or renter's insurance	20c.			
	20d.	Maintenance, repair, and upkeep expenses	20d			
	20e.	Homeowner's association or condominium dues	20e			
21.	Other.	Specify:	21. <b>+</b>			
22.	Calcul	ate your monthly expenses.				
	22a.	Add lines 4 through 21.	22a	\$3,490.70		
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$3,490.70		
23.	Calcul	ate your monthly net income.				
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$4,108.89		
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b>	\$3,490.70		
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$618.19		
24.	Do you	expect an increase or decrease in your expenses within the year after you file	this form?			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
	<b>☑</b> No					
	☐ Ye	es. Explain here: None.				

Debtor 1	Dorothy Smith Bailey	Case number (if know	<i>n</i> n)
15d Other	insurance (details):		
	al/RX		\$83.73
Visio	on		\$40.97
		Total:	\$124.70

Debtor 1	Dorothy	Smith	Bailey	_	
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	-	
	nkruptcy Court fo	or the: <b>SOUTHERN D</b>	ISTRICT OF TEXAS	_	
Case number (if known)			<del></del>		Check if this is a
()					amended filing

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	. \$26,144.55
	1c. Copy line 63, Total of all property on Schedule A/B	\$26,144.55
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$28,602.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,374.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$30,163.70
	Your total liabilities	\$63,139.70
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,108.89
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,490.70

Deb	tor 1	Dorothy Smith Bailey	Case number (if known)				
Pa	art 4	: Answer These Questions for Administrative and Statistic	al Records				
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?						
		No. You have nothing to report on this part of the form. Check this box and sub Yes	omit this form to the court with your other schedules.				
7.	Wha	at kind of debt do you have?					
	$\overline{\mathbf{A}}$	Your debts are primarily consumer debts. Consumer debts are those "incurr family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statist					
		<b>Your debts are not primarily consumer debts.</b> You have nothing to report on this form to the court with your other schedules.	this part of the form. Check this box and submit				
8.		the Statement of Your Current Monthly Income: Copy your total current monthly Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	nthly income from \$631.09				
9.	Сор	y the following special categories of claims from Part 4, line 6 of Schedule	E/F:				
			Total claim				
	Fror	n Part 4 on Schedule E/F, copy the following:					
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00				
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00				
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00				
	9d.	Student loans. (Copy line 6f.)	\$0.00				
	9e.	Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	oort as \$0.00				
	9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.	+\$0.00				

9g. Total. Add lines 9a through 9f.

\$0.00

Fill in this inf	ormation to id	dentify your case	:		
Debtor 1	<b>Dorothy</b> First Name	Smith Middle Name	Bailey Last Name	-	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States Ba	nkruptcy Court for	the: <b>SOUTHERN D</b>	ISTRICT OF TEXAS	.	
Case number (if known)					Check if this is an amended filing
Official Form	106Dec			_	
Declaration About an Individual Debtor's Schedules					
If two married people are filing together, both are equally responsible for supplying correct information.					
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					

Sign Below

3	
Did you pay or agree to pay someone who is NOT  ✓ No	an attorney to help you fill out bankruptcy forms?
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,
	Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read true and correct.	d the summary and schedules filed with this declaration and that they are
X /s/ Dorothy Smith Bailey	X
Dorothy Smith Bailey, Debtor 1	Signature of Debtor 2
Date 06/14/2022	Date
MM / DD / YYYY	MM / DD / YYYY

12/15

Fi	ll in this info	ormation to ide	ntify your case:				
De	ebtor 1	Dorothy First Name	Smith Middle Name	Bailey Last Name	_		
1 -	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name	_		
Ur	nited States Bar	nkruptcy Court for th	ne: <b>SOUTHERN DI</b>	STRICT OF TEXAS	_		
	ase number known)					Check if this is an amended filing	
Off	ficial Form	107					
Sta	atement o	 f Financial A	ffairs for Indi	viduals Filing for	Bankruptcy		04/22
you	r name and ca	se number (if knov	vn). Answer every	eparate sheet to this form question. tatus and Where You		itional pages, write	
1.	What is your of Married ☐ Not marrie	<b>current marital sta</b>	tus?				
2.	<ul> <li>During the last 3 years, have you lived anywhere other than where you live now?</li> <li>No</li> <li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>						
3.							
	✓ No ☐ Yes. Mak	e sure you fill out S	chedule H: Your Cod	lebtors (Official Form 106H).			

Del	otor 1	Dorothy Smith Bailey		Case nui	mber (if known)	
Р	art 2:	Explain the Sources of	Your Income			
4.	Fill in th	u have any income from employ the total amount of income you rec re filing a joint case and you have	eived from all jobs and all b	ousinesses, including par	t-time activities.	calendar years?
	✓ No	s. Fill in the details.				
5.	Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.					
	List eac	h source and the gross income fr	rom each source separately	v. Do not include income	that you listed in line 4.	
	□ No ☑ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
Era	m lenue	ry 1 of the current year until	Social Security	\$20,866.80		
		ry 1 of the current year until ı filed for bankruptcy:	Retirement	\$2,586.54		
			Social Security	\$44,928.00		
		endar year:  December 31, 2021 )	Retirement	\$5,173.08		
			Social Security	\$44,342.00		
		ndar year before that: December 31, 2020	Retirement	\$5,173.08		
		YYYY				

Debtor 1	Dorothy Smith Bailey		Case number (if known)			
Part 3:	List Certain Payments You M	ade Before `	You Filed for Ba	ankruptcy		
6. Are ei	ther Debtor 1's or Debtor 2's debts prim	narily consume	r debts?			
□ No	o. Neither Debtor 1 nor Debtor 2 has princurred by an individual primarily fo				d in 11 U.S.C. § 101(8) as	
	During the 90 days before you filed for	or bankruptcy, d	id you pay any credi	tor a total of \$7,575*	or more?	
	☐ No. Go to line 7.					
	Yes. List below each creditor to v total amount you paid that c child support and alimony.	reditor. Do not i	include payments fo	r domestic support ol	oligations, such as	
	* Subject to adjustment on 4/01/25 ar	nd every 3 years	after that for cases	filed on or after the o	late of adjustment.	
<b>√</b> Ye	es. Debtor 1 or Debtor 2 or both have p	orimarily consu	ımer debts.			
	During the 90 days before you filed for	or bankruptcy, d	id you pay any credi	tor a total of \$600 or	more?	
	☐ No. Go to line 7.					
	Yes. List below each creditor to v creditor. Do not include pay Also, do not include paymen	ments for dome	estic support obligation	ons, such as child su		
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
	Apartments, LLC	_			_ Mortgage	
Creditor's nan		Monthly			Car	
	treet	_			☐ Credit card ☐ Loan repayment	
		_			Suppliers or vendors	
The Wood	Ilands TX 77380 State ZIP Code				✓ Other <b>Apartment Lease</b>	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
	to Finance			\$28,602.00	_ Mortgage	
Creditor's nan  Attn: Ban		Monthly			☑ Car	
Number S					Credit card	
PO Box 9	01076				<ul><li>☐ Loan repayment</li><li>☐ Suppliers or vendors</li></ul>	
Fort Wort	h TX 76101				Other	
City	State ZIP Code					

Deb	tor 1	Dorothy Smith Bailey	Case number (if known)
7.	Insiders corpora agent, i	1 year before you filed for bankruptcy, did you make a payment on a distinctude your relatives; any general partners; relatives of any general partners of which you are an officer, director, person in control, or owner of 20 including one for a business you operate as a sole proprietor. 11 U.S.C. § is child support and alimony.	ners; partnerships of which you are a general partner; % or more of their voting securities; and any managing
	✓ No ☐ Yes	s. List all payments to an insider.	
8.		1 year before you filed for bankruptcy, did you make any payments or ed an insider?	transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	s. List all payments that benefited an insider.	
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	es
9.	List all s	1 year before you filed for bankruptcy, were you a party in any lawsuit such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes.	
	✓ No ☐ Yes	s. Fill in the details.	
10.	seized,	1 year before you filed for bankruptcy, was any of your property repos or levied? all that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,
	<u> </u>	Go to line 11. s. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a k ts from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	s. Fill in the details.	
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes	5	

Debtor 1		Dorothy Smith Bailey		Case number (if known)			
P	art 5:	List Certain	n Gifts and Co	ntributions			
13.	Within	2 years before y	you filed for bankr	uptcy, did you give any gifts with	n a total value of more t	han \$600 per perso	on?
	✓ No ☐ Yes	s. Fill in the deta	ils for each gift.				
14.		2 years before y charity?	ou filed for bankr	uptcy, did you give any gifts or c	contributions with a total	al value of more tha	an \$600
	✓ No ☐ Yes	s. Fill in the deta	ills for each gift or c	contribution.			
P	art 6:	List Certain	n Losses				
15.		1 year before yo isaster, or gaml		ptcy or since you filed for bankr	uptcy, did you lose any	thing because of th	neft, fire,
	✓ No	s. Fill in the deta	ils.				
P	art 7:	List Certain	n Payments or	Transfers			
16.	anyone Include	you consulted	about seeking bar ankruptcy petition p	ptcy, did you or anyone else acti nkruptcy or preparing a bankrup preparers, or credit counseling age	tcy petition?		
				Description and value of any p		Date payment	Amount of
	<b>eans a</b> ll on Who W	<b>nd Garcia, PLL</b> /as Paid	_C	<ul> <li>Partial Attorney fees, Court class, filing fees.</li> </ul>	fees, credit report,	or transfer was made	payment
100 Num		St, Ste 660 eet		-		06/2022	\$500.00
For City	t Worth	T) Sta		-			-
Ema	il or websi	e address		_			
Pers	on Who M	lade the Payment, if	f Not You	_			
17.	anyone	who promised	to help you deal v	ptcy, did you or anyone else acti vith your creditors or to make pa t you listed on line 16.			perty to
	✓ No	s. Fill in the deta	ils.				

Deb	tor 1	Dorothy Smith Bailey	Case number (if known)
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affa	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No ☐ Yes	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No ☐ Yes	s. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or , closed, sold, moved, or transferred?	instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates, pension funds, cooperatives, associations, and other financial institutions	•
	☑ No □ Yes	s. Fill in the details.	
21.	Do you	now have, or did you have within 1 year before you filed for bankrupt urities, cash, or other valuables?	cy, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	Have yo	ou stored property in a storage unit or place other than your home wit	hin 1 year before you filed for bankruptcy?
		s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Els	9
23.	-	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

Deb	otor 1	Dorothy Smith Bailey	Case number (if known)				
P	art 10:	Give Details About Environmental Information					
For	the pur	pose of Part 10, the following definitions apply:					
ı	hazardo	mental law means any federal, state, or local statute or regulation colus or toxic substance, wastes, or material into the air, land, soil, surfag statutes or regulations controlling the cleanup of these substances	ce water, groundwater, or other medium,				
		ans any location, facility, or property as defined under any environme or used to own, operate, or utilize it, including disposal sites.	ntal law, whether you now own, operate, or				
	<ul> <li>Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.</li> </ul>						
Rep	ort all i	notices, releases, and proceedings that you know about, regardless of	when they occurred.				
24.	Has ar	ny governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental				
	✓ No	s. Fill in the details.					
25.	☑ No	rou notified any governmental unit of any release of hazardous materi s. Fill in the details.	al?				
26.	Have y	rou been a party in any judicial or administrative proceeding under an	y environmental law? Include settlements and				
	✓ No	s. Fill in the details.					
P	art 11:	Give Details About Your Business or Connections to A	Any Business				
27.	Within busine	4 years before you filed for bankruptcy, did you own a business or hass?	eve any of the following connections to any				
	[ ] [ ]	A sole proprietor or self-employed in a trade, profession, or other activity. A member of a limited liability company (LLC) or limited liability partners. A partner in a partnership An officer, director, or managing executive of a corporation. An owner of at least 5% of the voting or equity securities of a corporation.	hip (LLP)				
		<ul><li>None of the above applies. Go to Part 12.</li><li>c. Check all that apply above and fill in the details below for each busines</li></ul>	s.				
28.		2 years before you filed for bankruptcy, did you give a financial state incial institutions, creditors, or other parties.	ment to anyone about your business? Include				
	□ No	s. Fill in the details below.					

### Case 22-31697 Document 1 Filed in TXSB on 06/17/22 Page 47 of 62

Debtor 1	Dorothy Smith Bailey	Case number (if known)
Part 12	Sign Below	
that the ar	nswers are true and correct. I under	ancial Affairs and any attachments, and I declare under penalty of perjury nd that making a false statement, concealing property, or obtaining money or y case can result in fines up to \$250,000, or imprisonment for up to 20 years,
	rothy Smith Bailey / Smith Bailey, Debtor 1 06/14/2022	X Signature of Debtor 2 Date
Did you at	tach additional pages to Your Staten	nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who is n	an attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. N	Name of person	Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

+	\$78	filing fee administrative fee trustee surcharge
,	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

+		filing fee administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtoreducation-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/servicesforms/bankruptcy/credit-counseling-and-debtoreducation-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

ln	re Dorothy Smith Bailey C	ase No.	
	С	hapter	13
	DISCLOSURE OF COMPENSATION OF ATTORNE	Y FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the atto that compensation paid to me within one year before the filing of the petition in bankru services rendered or to be rendered on behalf of the debtor(s) in contemplation of or is as follows:	uptcy, or a	greed to be paid to me, for
	For legal services, I have agreed to acceptFixed Fee:	\$4	,500.00
	Prior to the filing of this statement I have received		\$126.00
	Balance Due	\$4	,374.00
2.	The source of the compensation paid to me was:  ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	✓ Debtor Other (specify)		
4.	☑ I have not agreed to share the above-disclosed compensation with any other per associates of my law firm.	rson unles	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with another person cassociates of my law firm. A copy of the agreement, together with a list of the na compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all asp	ects of the	e bankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in debtor bankruptcy;</li> </ul>	etermining	whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and plan wh	ich may b	e required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing,	and any	adjourned hearings thereof;

B2030 (Form	2030)	(12/15)
-------------	-------	---------

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/14/2022 /s/ Donald W. Bryeans

Date Donald W. Bryeans
Bryeans and Garcia, PLLC

5001 S. Cooper St., Ste 209 Arlington, TX 76017

Phone: (817) 440-3333 / Fax: (817) 440-3334

Bar No. 24057716

/s/ Dorothy Smith Bailey

Dorothy Smith Bailey

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Dorothy Smith Bailey CASE NO

CHAPTER 13

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her

knowledge.			
Date 6/14/2022	Signature	/s/ Dorothy Smith Bailey	
		Dorothy Smith Bailey	

Alexander Apartments, LLC 1475 Sawdust Rd The Woodlands, TX 77380

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Bryeans and Garcia, PLLC 100 E 15th St, Ste 660 Fort Worth, TX 76102

Capital One Services, LLC/Walmart PO Box 30285 Salt Lake City, UT 84130-0285

Chase Auto Finance Attn: Bankruptcy PO Box 901076 Fort Worth, TX 76101

Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Citibank
Attn: Bankruptcy
P.O. Box 790034
St Louis, MO 63179

Clinet Services, Inc 3451 Harry S Truman Blvd St Charles, MO 63301-4047

Comenity/Jared PO Box 650972 Dallas, TX 75265-0972 Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054

FMA Alliance, Ltd PO Box 2409 Houston, TX 77252-2409

IRS Centralized Insolvency Operation PO Box 7364 Philadelphia, PA 19101-7346

Kohls/Capital One Attn: Credit Administrator PO Box 3043 Milwaukee, WI 53201

MCHD Montgomery Hospital District PO Box 5587 Conroe, TX 77305-2587

Midland Credit Management, Inc PO Box 301030 Los Angeles, CA 90030

Midland Credit Managements, Inc 320 E Big Beaver Rd, Ste 300 Troy, MI 48083

National Enterprise Systems 2479 Edison Blvd, Unit A Twinsburg, OH 44087-2340

Office of the Attorney General PO Box 12548
Austin, TX 78711-2548

Regional Finance 3401 W Davis St Conroe, TX 77304

Synchrony Bank/Care Credit PO Box 965064 Orlando, FL 32896-5064

Synchrony Bank/La-Z-Boy Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

US Bank/RMS Attn: Bankruptcy PO Box 5229 Cincinnati, OH 45201

US Trustee 515 Rusk, Suite 3516 Houston, TX 77002

Fill in this inf	ormation to i	dentify your case	e:	Check as	directed in lines 1	i allu zi
Debtor 1	Dorothy First Name	Smith Middle Name	Bailey Last Name	According to Statement:	the calculations require	ed by this
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	able income is not determ 1 U.S.C. § 1325(b)(3).	mined
		or the: <b>SOUTHERN I</b>	DISTRICT OF TEXAS		able income is determine 1 U.S.C. § 1325(b)(3).	ed
Case number				3. The con	nmitment period is 3 yea	ars.
if known)				4. The con	nmitment period is 5 yea	ars.
fficial Form	122C-1			Check if t	his is an amended filing	)
		of Your Curre	nt Monthly Income			
nd Calcula	tion of Con	nmitment Peri	iod			
	iculate Your <i>i</i>	Average Monthly	Income			
		Average Monthly				
What is your	marital and filin	g status? Check one				
What is your	marital and filing		only.			
What is your  Not married.  Fill in the ave bankruptcy c August 31. If in the result.	marital and filing ried. Fill out Colu Fill out both Col grage monthly in ase. 11 U.S.C. if the amount of yo Do not include ar	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 icome that you receiv § 101(10A). For exampur monthly income vany income amount mo	only.	ber 15, the 6-month he income for all 6 oth spouses own t	th period would be Marc months and divide the he same rental property	ch 1 throug total by 6.
What is your  Not marr  Married.  Fill in the ave bankruptcy c August 31. If in the result.	marital and filing ried. Fill out Colu Fill out both Col grage monthly in ase. 11 U.S.C. if the amount of yo Do not include ar	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 icome that you receiv § 101(10A). For exampur monthly income vany income amount mo	only.  2-11.  ved from all sources, derived nple, if you are filing on Septem ried during the 6 months, add the tre than once. For example, if both sources are the sources and the sources are the sources are the sources.	ber 15, the 6-monthe income for all 6 toth spouses own the line, write \$0 in the	th period would be Marc months and divide the he same rental property e space.	ch 1 through total by 6.
What is your  Not married.  Fill in the ave bankruptcy c August 31. If in the result.	marital and filing ried. Fill out Colu Fill out both Col grage monthly in ase. 11 U.S.C. if the amount of yo Do not include ar	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 icome that you receiv § 101(10A). For exampur monthly income vany income amount mo	only.  2-11.  ved from all sources, derived nple, if you are filing on Septem ried during the 6 months, add the tre than once. For example, if both sources are the sources and the sources are the sources are the sources.	ber 15, the 6-month he income for all 6 oth spouses own t	th period would be Marc months and divide the he same rental property	ch 1 through total by 6
What is your  Not married.  Fill in the ave bankruptcy c August 31. If in the result. I income from the second sec	marital and filing ried. Fill out Colu- Fill out both Colu- erage monthly in ase. 11 U.S.C. of the amount of yo Do not include an hat property in or	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 icome that you receiv § 101(10A). For exampur monthly income vany income amount mo	only.  2-11.  ved from all sources, derived only, if you are filing on Septem ried during the 6 months, add the rethan once. For example, if but have nothing to report for any	ber 15, the 6-monthe income for all 6 toth spouses own the line, write \$0 in the Column A	th period would be Marc months and divide the he same rental property e space.  Column B  Debtor 2 or	ch 1 throu total by 6
What is your  Not married.  Fill in the ave bankruptcy c August 31. If in the result. I income from the second of	ried. Fill out Columbia. Fill out both Columbia. Fill out both Columbia. The columbia see. 11 U.S.C. the amount of your Do not include an hat property in or agges, salary, tiperroll deductions).	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 acome that you receives 101(10A). For example mouth monthly income vany income amount mone column only. If you pe, bonuses, overtimes,	only.  2-11.  ved from all sources, derived only, if you are filing on Septem ried during the 6 months, add the rethan once. For example, if but have nothing to report for any	ber 15, the 6-monthe income for all 6 oth spouses own the line, write \$0 in the Column A Debtor 1	th period would be Marc months and divide the he same rental property e space.  Column B Debtor 2 or non-filing spouse	ch 1 through total by 6
What is your  Not married.  Fill in the ave bankruptcy c August 31. If in the result. I income from the income from the income from the income all pay Alimony and All amounts frequences of yregular contributions.	ried. Fill out Columbia. Fill out both Columbia Fill out both Fill out b	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 acome that you receives 101(10A). For example, and the column only. If you only income amount more column only. If you only incomes, overtime, which are regularly endents, including commarried partner, mer	only.  2-11.  ved from all sources, derived only, if you are filing on Septem ried during the 6 months, add the rethan once. For example, if but have nothing to report for any have nothing to report for any under payments from a spouse.  paid for household hild support. Include mbers of your household, include payments from a	ber 15, the 6-month he income for all 6 toth spouses own the line, write \$0 in the Column A Debtor 1	th period would be Marc months and divide the he same rental property e space.  Column B Debtor 2 or non-filing spouse \$0.00	ch 1 through total by 6.
What is your  Not married.  Fill in the ave bankruptcy c August 31. If in the result. If income from the incom	ried. Fill out Columbia. Fill out both Columbia. Fill out both Columbia. Fill out both Columbia. Fill out both Columbia. The amount of your bound of include are the amount of your bound of include and the property in or an amount of your depositions from an units, parents, and ot include payments.	g status? Check one umn A, lines 2-11. lumns A and B, lines 2 acome that you receives 101(10A). For example, and the column only income amount more column only. If you are so, bonuses, overtime, which are regularly endents, including commarried partner, mer roommates. Do not include the column only including commarried partner, mer roommates.	only.  2-11.  ved from all sources, derived only, if you are filing on Septem ried during the 6 months, add the rethan once. For example, if but have nothing to report for any and commissions  ude payments from a spouse.  paid for household hild support. Include mbers of your household, include payments from a 3.	ber 15, the 6-month he income for all 6 toth spouses own the line, write \$0 in the Column A Debtor 1  \$0.00	th period would be Marc months and divide the he same rental property e space.  Column B Debtor 2 or non-filing spouse \$0.00	ch 1 throu total by 6

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00	\$0.00	-		
Ordinary and necessary operating expenses	\$0.00	\$0.00			
Net monthly income from a business profession, or farm	\$0.00	\$0.00	Copy here ->	\$0.00	\$0.00

Deb	Dorotny Smith Balley			c	ase number (if kı	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net income from rental and other r	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all	\$0.00	\$0.00				
	deductions)  Ordinary and necessary operating -	_ \$0.00	_ \$0.00				
	expenses			Сору			
	Net monthly income from rental or other real property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Interest, dividends, and royalties				\$0.00	\$0.00	
8.	Unemployment compensation				\$0.00	\$0.00	
	Do not enter the amount if you conte benefit under the Social Security Act						
	For you		•	40			
	For your spouse		*	<del></del> 40			
10.	disability, combat-related injury or disuniformed services. If you received of title 10, then include that pay only amount of retired pay to which you wunder any provision of title 10 other to the t	any retired pay paid to extent that it does ould otherwise be each an chapter 61 of the listed above. Spereceived under the var crime, a crime as r compensation, pees Government in cability, or death of	I under chapter 61 is not exceed the shitled if retired that title.  cify the source and a Social Security A gainst humanity, on sion, pay, annuity onnection with a a member of the	ct; r			
	Total amounts from separate pages,  Calculate your total average month Add lines 2 through 10 for each coluin Then add the total for Column A to the	nly income. mn. ne total for Column				+ \$431.09 =	\$631.09  Total average monthly income
P	Determine How to M	easure Your Do	eductions fron	n Income	9		
12	Conv your total average monthly in	come from line 1	i				\$631.09

Deb	tor 1	Dorothy Smith Bailey	Case number (if known)	
13.	Calc	culate the marital adjustment. Check one:		
		You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that wa of you or your dependents, such as payment of the spouse's tax liathan you or your dependents.  Below, specify the basis for excluding this income and the amount necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	ability or the spouse's support of someone other	
		Total		\$0.00
14.	You	r current monthly income. Subtract the total in line 13 from line 1.	2.	\$631.09
15.		culate your current monthly income for the year. Follow these st	·	*
	15a.	Copy line 14 here 🗲		\$631.09
		Multiply line 15a by 12 (the number of months in a year).		X 12
	15b.	The result is your current monthly income for the year for this par	t of the form.	\$7,573.08
16.	Calc	culate the median family income that applies to you. Follow thes	e steps:	
	16a.	Fill in the state in which you live.	xas	
	16b.	Fill in the number of people in your household.	2	
	16c.	Fill in the median family income for your state and size of househ To find a list of applicable median income amounts, go online usi instructions for this form. This list may also be available at the base	ing the link specified in the separate	\$74,636.00
17.	How	do the lines compare?		
	17a.	under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out	Calculation of Your Disposable Income (Official Form	n 122C-2).
	17b.	Line 15b is more than line 16c. On the top of page 1 of this 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation On line 39 of that form, copy your current monthly income from	on of Your Disposable Income (Official Form 122C-	l under <b>:2)</b> .
Pa	art 3	Calculate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)	
18.	Сор	y your total average monthly income from line 11.		\$631.09
19.	that	calculating the commitment period under 11 U.S.C. § 1325(b)(4) all me, copy the amount from line 13.		
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a		\$0.00
	19b.	Subtract line 19a from line 18.		\$631.09

### Case 22-31697 Document 1 Filed in TXSB on 06/17/22 Page 61 of 62

Debtor 1		Dorothy Smith Bailey	Case number (if known)						
20.	Calc	culate your current monthly income for the year.	Follow these steps:						
	20a.	Copy line 19b		\$631.09					
		Multiply by 12 (the number of months in a year).		X 12					
	20b.	The result is your current monthly income for the y	year for this part of the form.	\$7,573.08					
	20c.	Copy the median family income for your state and	size of household from line 16c.	\$74,636.00					
21.	How	How do the lines compare?							
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.								
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.								
P	art 4	: Sign Below							
	By s	igning here, under penalty of perjury I declare that th	ne information on this statement and in any attachments is true a	nd correct.					
		s/ Dorothy Smith Bailey	X						
		Porothy Smith Bailey, Debtor 1	Signature of Debtor 2						
		Date_ <b>6/14/2022</b>	Date						
		MM / DD / YYYY	MM / DD / YYYY						

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

### **Current Monthly Income Calculation Details**

In re: Dorothy Smith Bailey

Case Number: Chapter: 13

### 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.

Debtor or Spouse's Income	Description (	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month	
Debtor	Daughter Co		\$200.00	\$200.00	\$200.00	\$200.00	\$200.00	

#### 8a. Unemployment compensation claimed to be a benefit under the Social Security Act.

Debtor or Spouse's Income	Description (i	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month	
<u>Debtor</u>	Social Secur \$1,567.40		\$1,567.40	\$1,567.40	\$1,567.40	\$1,567.40	\$1,567.40	
Spouse	Social Secur \$1,910.40		\$1,910.40	\$1,910.40	\$1,910.40	\$1,910.40	\$1,910.40	

#### 9. Pension and retirement income.

Debtor or Spouse's Income	Description (if	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month	
Spouse	Retirement \$431.09	\$431.09	\$431.09	\$431.09	\$431.09	\$431.09	\$431.09	